HARNET

UNTY HEALTH DEPARTMENT MENTAL HEALTH SECTION

Nº08208

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

1000	
Name: (owner) Howell Edwards	New Installation Septic Tank
Property Location: SR# 1578	☐ Repairs ☐ Nitrification Line
Subdivision	Lot #
TAX ID#	Quadrant #
Contractor: Ted Brown	Registration #
Basement with Plumbing: Garage: Garage:	
Water Supply:	7
Distance From Well: 100 ft.	
Following are the specifications for the sewage disposa	al system on above captioned property.
Type of system: Conventional Other	
Size of tank: Septic Tank: 1000 gallons Pump	
Subsurface No. of exact length	14 /1
Drainage Field ditches 3 of each ditch	
French Drain: Linear feet	
	te: 5-3-95
PERMIT NO.	spected by: James Markot E
	Environmental Health Specialist
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	No.